TX42/3720101



DEPARTMENT OF THE ARMY

HEADQUARTERS U.S. ARMY AIR DEFENSE ARTILLERY CENTER AND FORT BUSS. TEXAS
August 6, 1987

REPLY TO ATTENTION OF

Directorate of Engineering and Housing



SUPERFUND BRANCH

Ms. Sabrina M. Wells
Superfund Compliance Section (6H-EC)
U.S. Environmental Protection Agency
Region VI
Allied Bank Tower at Fountain Place
1445 Ross Avenue
Dallas, Texas 75202

x-Ref SA Vol#1

Dear Ms. Wells:

Enclosed is EPA Form 8900-1 for the Fort Bliss Hazardou, Waste Storage Facility, as requested by your letter dated July 22, 1987.

Your previous request for this information in March 1987 may have been lost because of the wrong address. Fort Bliss is an Army installation. Our correct address is as follows:

Commander
U.S. Army Air Defense Artillery Center and Fort Bliss
Directorate of Engineering and Housing
ATTN: Environmental Management Office
Fort Bliss, Texas 79916-6103

If you have further questions on this matter, please contact Mr. Nickolas, this Directorate's Environmental Management Office, at (915) 568-7930 or 568-5502.

Sincerely,

Joseph P. Kish

Colonel, U.S. Army Director, Engineering and Housing

Enclosure

MAR 0 6 1992

REORGANIZED

TX 4 213 720 101

SEPA Notification or Hazardous Waste Site

United States Environmental Patrection Agency Washington DC 20460

This initial notification information is required by Section 103(c) of the Comprehensive Environmental Response, Compensation, and Liability Act of 1980 and must be mailed by June 9, 1981.

4	Person Required to Notify: Enter the name and address of t	he person	Name		COL	NEL	Josep	h P.	Kish			-
	or organization required to notify	/-	Stree							-		
			- Manager	-	ATZC			-		-		
_			City	-		110			- State	TX	Zip Code	79916
	Site Location:											
	Enter the common name (if know actual location of the site.	vn) and	Name	of Site	e H	ara	rdous 1	Waste	Storage	Faci	lity	
	actual location of the site.		Street		Bldg	110	514					
			City	Fo	rt B	liss	Count	v E1	Paso State	TX	Zip Code	79916
	Person to Contact:											
	Enter the name, title (if applicable business telephone number of the	e), and	Name	(Last.	First an	Title)	RAB, FA	AZLUR	, CHIEF,	Envi	ronment	al Mgmt
	to contact regarding information submitted on this form.	e person	Phone		(915) 56	8-7930)/550	2/6185			
	Dates of Waste Handling:		-			,,						
	Enter the years that you get mate	waste										
	treatment, storage, or disposal be ended at the site.	gan and	From (Yeari	8.	2	To (Yea	n pr	resent			
	Option I: Select general waste type you do not know the general waste encouraged to describe the site in					-	nesource	e consei	ption is availar vation and Re CFR Part 261).	covery	ersons famil Act (RCRA) :	liar with the Section 3001
	General Type of Waste: Place an X in the appropriate boxes. The categories listed overlap. Check each applicable category.	Source of Place an 2 boxes.	Wast X in th	e: e app	roprie	te	Specific EPA has listed in appropria the list o	Type of assigne the regulate four-		number Section in the bo	oxes provide	RA. Enter the
	1. D'Organics	1. D Min	ina				located	A me E	A Degion ser	ving the	State in wh	ich the site i
	2. 2 Inorganics	2 Con		ion			F 200		_			
	3. M Solvents	3. Tex					D002		U052		D0	13
	4. M Pesticides	4. D Fert	ilizer				D002		U117		Ul	9.7
	5. M Heavy metals	5. 🗆 Pap	er/Pri	nting			U002		U112	-	U2	26
	6. M Acids	6. D Lear	ther Ta	nnin	9	-	U003		U133	-	Pl	
	7. Ø Bases	7. 🗆 Iron					U211		F003	-	U2	
	3. ED PCBs	8 M Che				1	U080		U159 D008	-	U2	-
,	9. Mixed Municipal Waste	9. D Plat					F001		D154	-	U2	39
		10. M Mili					U044		U161	-	-	
		11. D Elec			uctors		F002		U242	-	-	
4		12. Ø Tran					-		15446			
1		13. 🗆 Utili 14. 🗆 Sani										
- 0		5. Phot			0	1						
		6. Ø Lab										
		7. Unki		iai.		1						
		B. Ø Othe	r (Spe	cify)								
		Motor	Poo	1 0	pera	tion	ıs					
F	orm Approved				-							
	orm Approved MB No. 2000-0138											
2	PA Form 8900 1											

OF	THE	ORIG	GINAL	

F	Was's Quantity:	Facility Type Total Facility Waste	Amount .
	Place an X in the appropriate boxes to indicate the facility types found at the site.	1. Piles cubic feet	
	In the "total facility waste amount" space	2. □ Land Treatment 3. □ Landfill gallons 2500	
	give the estimated combined quantity	4. ☐ Tanks Total Facility Area	
	(volume) of hazardous wastes at the site using cubic feet or gallons.	5. □ Impoundment square feet 800	
	In the "total facility area" space, give the	6. Underground Injection	
	estimated area size which the facilities occupy using square feet or acres	7. C Drums, Above Ground acres	
		8. Drums, Below Ground H/W Storage by Conta	iners
3	Known, Suspected or Likely Releases t	to the Environment:	
	Place an X in the appropriate boxes to indica or likely releases of wastes to the environment	te any known, suspected.	ed Likely OX Non
	Note: Items Hand I are optional. Completing hazardous waste sites. Although completing	these items will assist EPA and State and local governments in the items is not required, you are encouraged to do so.	locating and assessing
H	Sketch Map of Site Location: (Optional Sketch a map showing streets, highways, routes or other prominent landmarks near the site. Place an X on the map to indicate the site location. Draw an arrow showing the direction north. You may substite *p. a	Please see Enclosed Map	
	Description of Site: (Optional) Describe the history and present conditions of the site. Give directions to		
	Describe the history and present	Please See Enclosed Map	
	Describe the history and present conditions of the site. Give directions to the site and describe any nearby wells, springs, lakes, or housing. Include such information as how waste was disposed and where the waste came from. Provide any other information or comments which		
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,	Describe the history and present conditions of the site. Give directions to the site and describe any nearby wells, springs, lakes, or housing. Include such information as how waste was disposed and where the waste came from. Provide any other information or comments which may help describe the site conditions. Signature and Title: The person or authorized representative		Owner Present
,	Describe the history and present conditions of the site. Give directions to the site and describe any nearby wells, springs, lakes, or housing. Include such information as how waste was disposed and where the waste came from. Provide any other information or comments which may help describe the site conditions. Signature and Title: The person or authorized representative (such as plant managers, superintendents, trustees or attorneys) of persons required to notify must sign the form and provide a	Please See Enclosed Map	□ Owner, Present □ Owner, Past □ Transporter
•	Describe the history and present conditions of the site. Give directions to the site and describe any nearby wells, springs, lakes, or housing. Include such information as how waste was disposed and where the waste came from. Provide any other information or comments which may help describe the site conditions. Signature and Title: The person or authorized representative (such as plant managers, superintendents, trustees or attorneys) of persons required to notify must sign the form and provide a mailing address (if different than address in item A. For other expressors provides.	Please See Enclosed Map Name COl Joseph P. Kish	

1-1

OVERSIZE DOCUMENT

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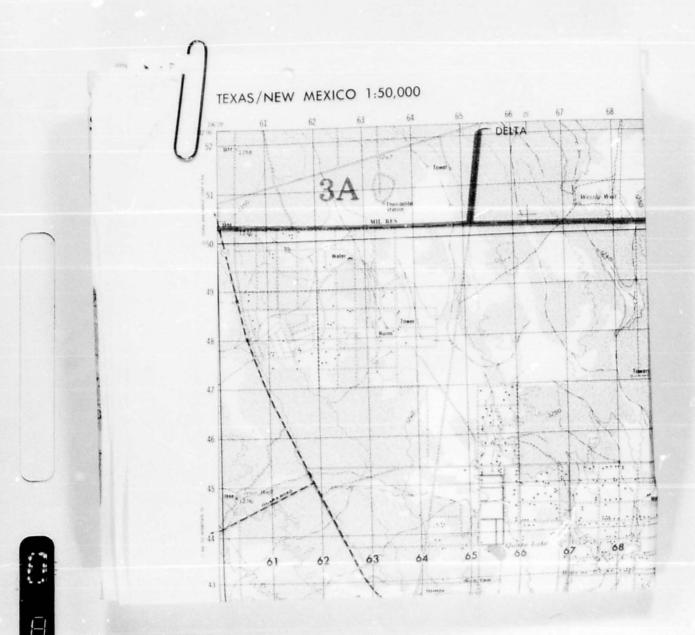
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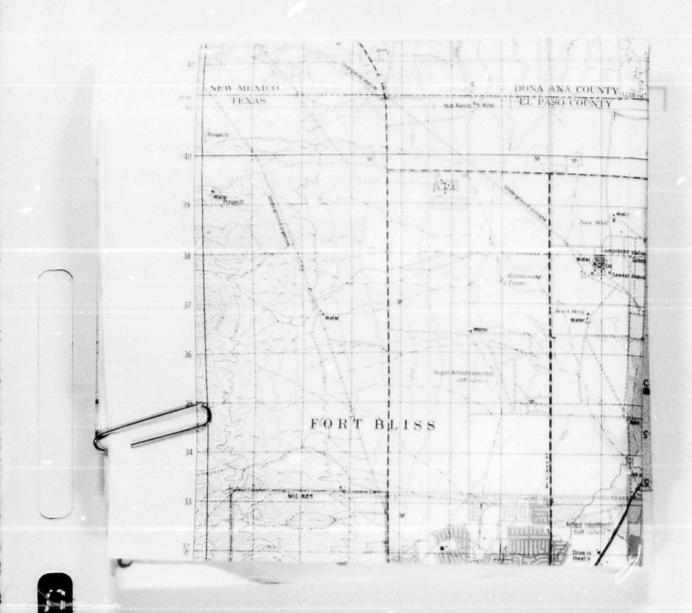
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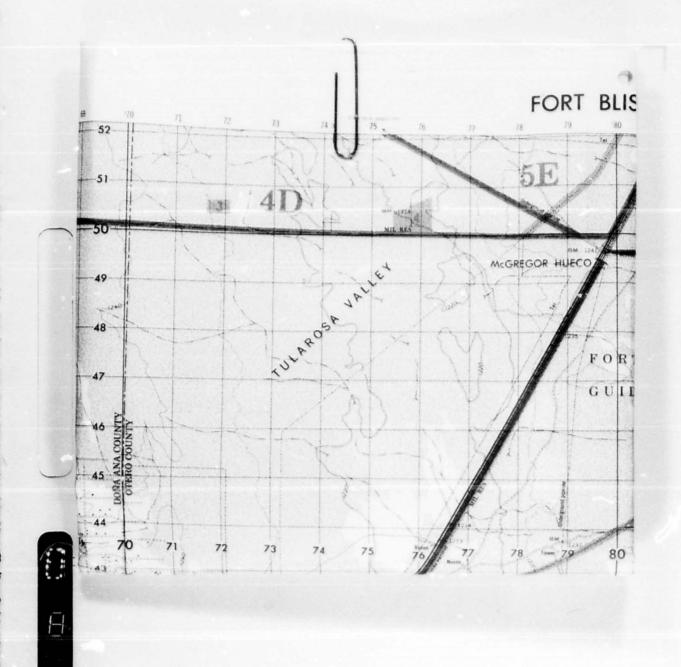
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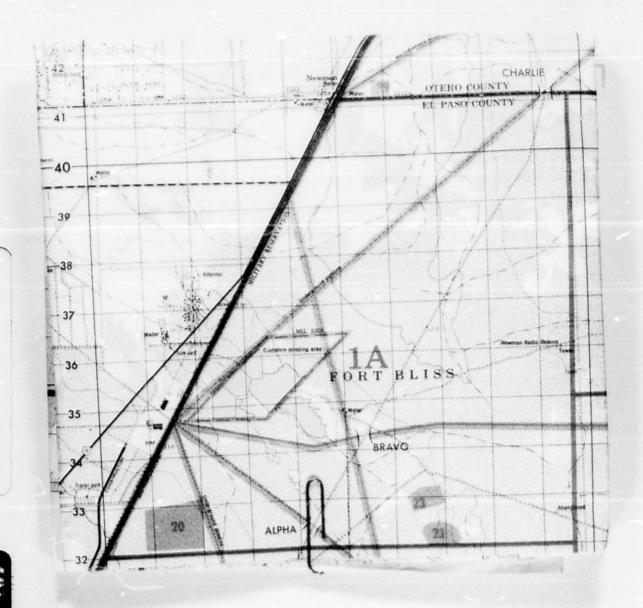
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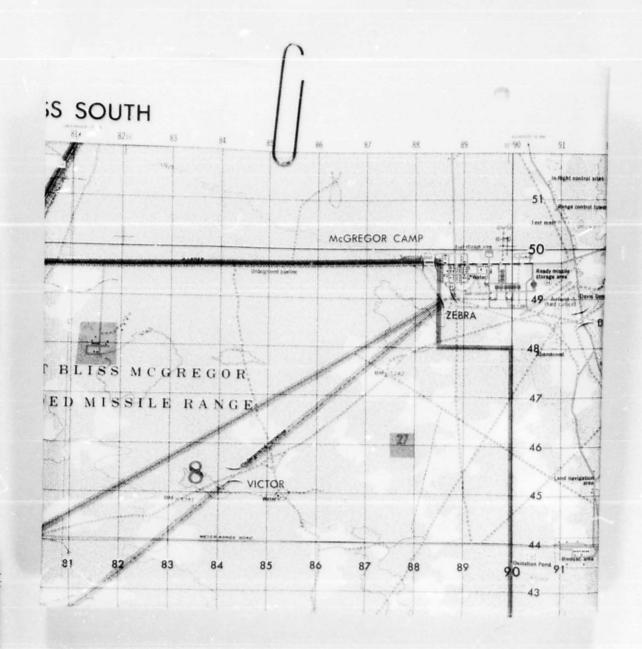


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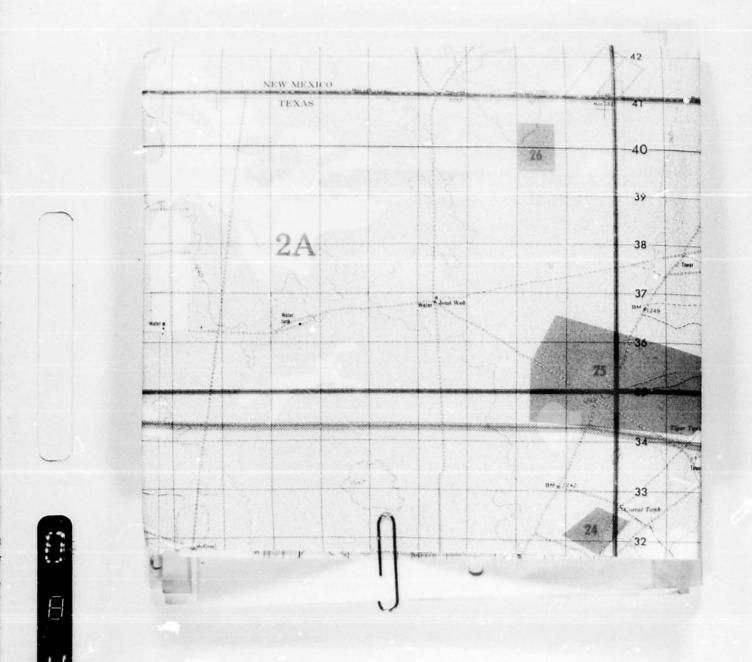


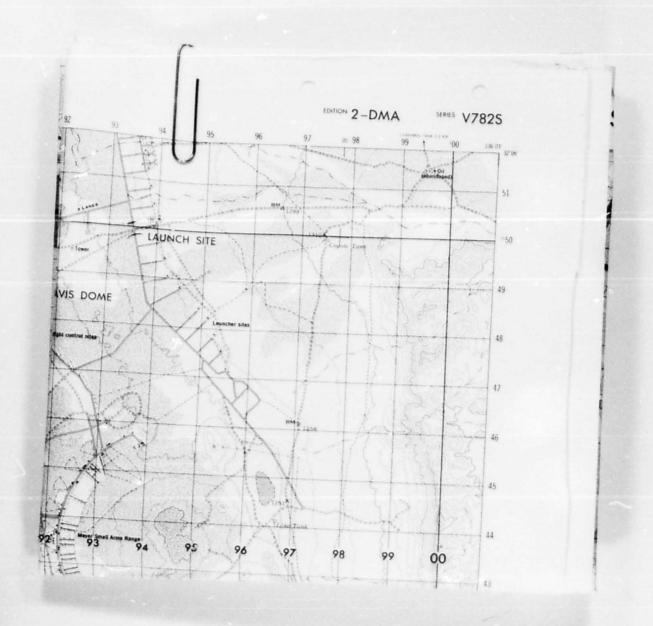




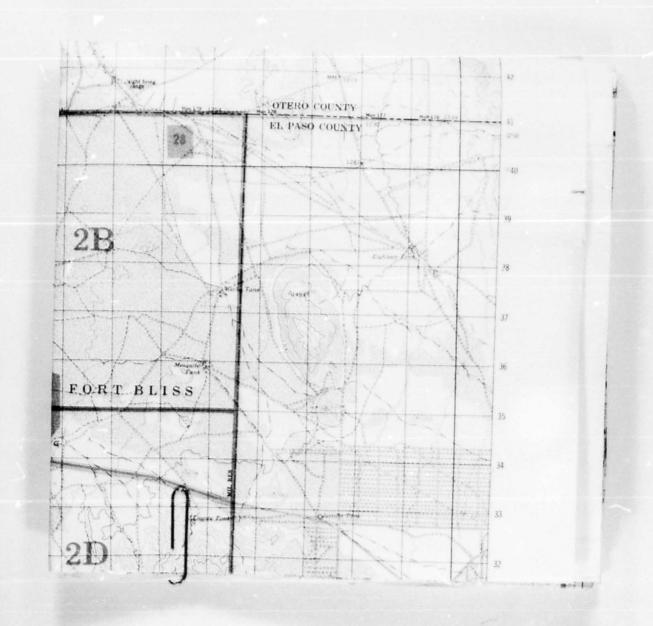


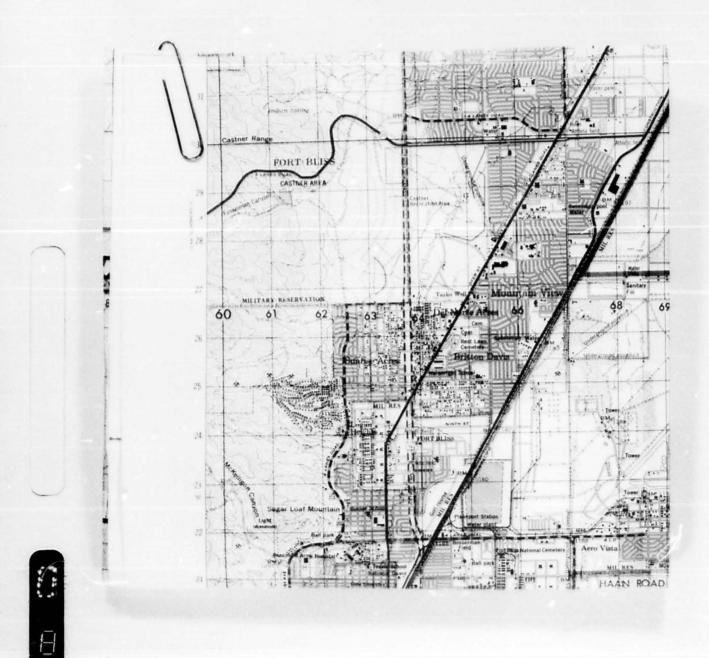
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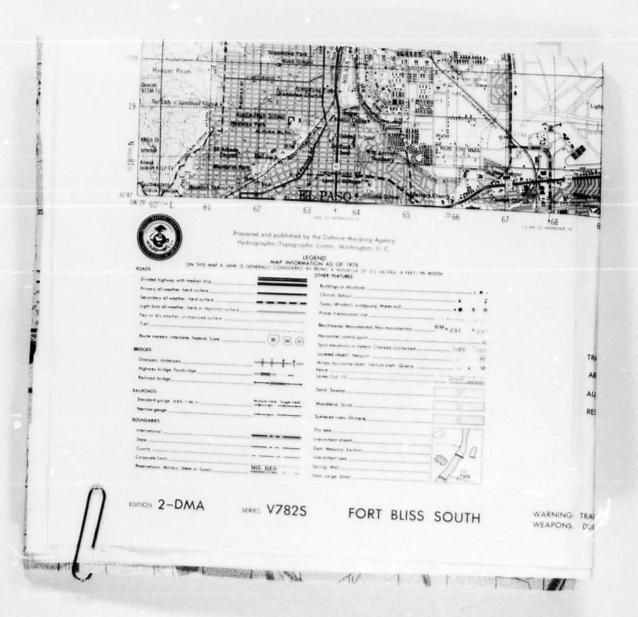


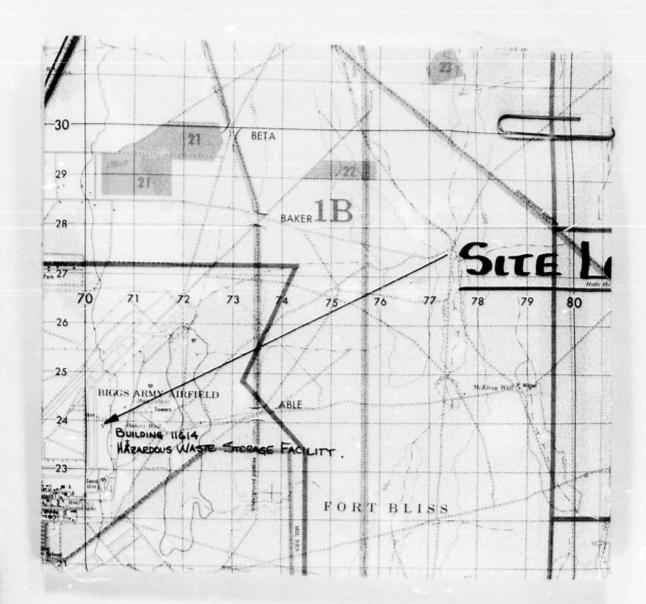


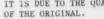


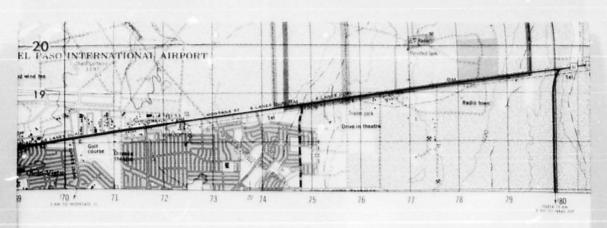












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Martin	LINE COME SECURIOR
DESIGNATION AND	11/135
Example	138

MILITARY LEGEND

MINING AREA BOUNDARY ____ MEAS RESTRICTED FROM TANK TRAFFIC _

ITHORIZED TANK CROSSING _

STRICTED AREA -

NNING AREAS 3A, 4D AND 5E HAVE BEEN IMPACT AREAS FOR VARIOUS IDS OR UNIDENTIFIED OBJECTS WILL BE AVOIDED, FLAGGED AND REPORTED.



